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EXHIBIT 19
DATE 3/16/07
SB 289

March 16, 2007

Senate Bill 289

Chairman Jore,

I am Betty Beverly, a mother of a child with a severe asthma, and a volunteer member of the Board of Directors for the American Lung Association of the Northern Rockies.

Our Association thanks Senator Gallus for bringing forward this bill to address an issue that we thought was covered when the original law was first written and passed almost unanimously last session.

Montana's asthma medication access law provides children with asthma the process to be able to carry and self-administer their medications, especially during emergency situations and when they may be away from any other help. The doctor will only provide the orders to do so for children he or she knows need it and know how to use it following the doctor's instructions.

These simple changes are addressing a medical condition called anaphylaxis.

Anaphylaxis is a sudden, severe and potentially fatal, systemic allergic reaction that can involve the child's ability to breathe and their heart to work. Of course there are only a few children who need this kind of protection and the ability to immediately respond. That also means that those children need to have their epinephrine within arms reach at any time.

When the epinephrine is injected, it rapidly reverses the effects of a severe allergic reaction by reducing throat swelling, opening the airways, and maintaining blood pressure. In short, this can be a lifesaver for these kids.

The language in the law follows federal guidelines under which the original law was written. Information about using the anaphylaxis medication is in the existing law, but there has been some confusion in the schools on if that medication is also included in the law. Clearing that up is important and adding these few words will help provide the needed clarification and protection.

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Breathe,
Nothing Else
Matters®**

Founded in 1904, the
American Lung Association
includes affiliated associations
throughout the U.S.